



City of South Tucson
Business License Application

Name of Business: _____

Doing Business As: _____

Business Street Address (for proposed permit activity, commercial rentals indicate each separate address & unit/s):

If leasing business location, please provide name and address of property owner: _____

City: _____ State: _____ Zip: _____

Business Mailing Address (if different): _____

Business Owner's Home Address: _____

Business Phone Number: _____ Fax: _____ E-Mail: _____

Business Owner's Name: _____ Title: _____

Social Security Number and/or EIN: _____ Date of Birth: _____

Date Business Began in the City of South Tucson: _____

State Sales Tax ID Number (must submit copy of Arizona State Issued Certificate): _____
(See Attached ARIZONA DEPARTMENT OF REVENUE application)

TYPE OF LICENSE: ☐ New ☐ Renewal ☐ Temporary _____ / _____ / _____ to _____ / _____ / _____
Contractor's License Numbers (if applicable): ROC _____ Start Date _____ Expiration _____

AZ Dealers License _____

Type of Ownership: ☐ *Sole Proprietor ☐ Limited Liability Partnership ☐ Corporation ☐ LLC

*In accordance with A.R.S. § 41-1080 all individuals requesting a business license must provide the municipality with identification as listed on the attached form. All sole proprietorships must complete the attached form and provide the City Clerk with copies of appropriate identification prior to the processing of your business license application:

Business Activity (Check one that applies closest to your business type):

- ☐ Heating/Air ☐ Electrician ☐ Plumbing ☐ Construction ☐ Landscaping ☐ Pest Control
☐ Lodging/Motel/Hotel ☐ Restaurant/Bar ☐ Retail Service ☐ Mobile Business
☐ Assisted Living (number of beds) _____ ☐ Day Care ☐ Caregiver ☐ Banking/Financial
☐ Manufacturing ☐ Real Estate ☐ Medical ☐ Veterinary ☐ Legal Services ☐ Storage
☐ Wholesale ☐ Commercial Rental (number of units) _____
☐ Beauty Salon (number of chairs) _____ ☐ Barber Parlor (number of chairs) _____
☐ Non-Profit (explain) _____
☐ Special Event _____
☐ Other _____

Describe above business activity _____

FOR OFFICE USE ONLY		INITIALS/ DATE
CITY CLERK OFFICE		
Date Rec'd Application		
Business Start Date:		
Commercial Rentals # Of Units:		
Occupational Fee Per Qtr:		\$
Liquor License Fee Per Qtr:		\$
Sign Renewal Fee:		\$
Effective Year :		
ZONING DEPT.		
Zoning Class:		
Pima County Assessor Verification/Ownership:		
Parcel ID:		
APPROVED		
DENIED		
Comments		
BUILDING DEPT		
Building Inspector Review Date		
APPROVED		
DENIED		
Comments		
FIRE DEPT:		
APPROVED		
DENIED		
Comments		
FORWARD TO CITY CLERK'S OFFICE		
FINANCE DEPARTMENT		
AZ STATE LICENSE		
OCCUP ACCT NO:		
BUSINESS LICENSE ACCT NO:		
SIGN LICENSE ACCT NO:		
LIQUOR LICENSE ACCT NO:		
Comments:		
CITY CLERK OFFICE		
BUSINESS LICENSE ISSUED		
BUSINESS LICENSE NO:		



City of South Tucson
City Clerk's Department
1601 South 6th Avenue
South Tucson, Az 85713
(520) 792-2424 ext 313

**{ RETURN ORIGINAL OF THIS
FORM WITH A COPY OF YOUR
IDENTIFICATION TO THIS
ADDRESS**

SOLE PROPRIETORSHIPS (ONLY)
LICENSING ELIGIBILITY REQUIREMENT (ARS § 41-1080)

FULL NAME	LAST	FIRST	MIDDLE
Business Address (as shown on license or application)			
City, State and Zip code			

On May 1, 2008 Governor Napolitano signed Laws 2008, Ch. 152 (House Bill 2745) into law. The new law contains a "licensing eligibility" (A.R.S. § 41-1080) preventing a municipality from issuing a (new or renewed) license to an individual unless the individual has provided the municipality with one of the forms of identification listed in the law.

To become or remain eligible for a license, all proprietorships must complete the attached form, staple a photocopy showing both side of your identification to the back and return to the address below. Only provide one of the forms of identification listed on the attached eligibility form (mark an "X" next to the one you are submitting.) **Please note that this applies to all "individual" licenses and not entities such as Corporation and LLC's.**

- ☐ 1. An Arizona driver license issued after 1996 or an Arizona non-operating identification license.
- ☐ 2. A driver license issued by a state that verifies lawful presence in the United States (Licenses from HI, IL, ME, MD, NM, TX, UT and WA are not acceptable)
- ☐ 3. A birth certificate or delayed birth certificate issued in any state, territory or possession of the United States.
- ☐ 4. A United States certificate of birth abroad.
- ☐ 5. A United States passport.
- ☐ 6. A foreign passport with a United States Visa.
- ☐ 7. A I-94 form with a photograph.
- ☐ 8. A United States citizenship and immigration services employment authorization document or refugee travel document.
- ☐ 9. A United States certificate of Naturalization.
- ☐ 10. A United States certificate of citizenship.
- ☐ 11. A tribal certificate of Indian blood.
- ☐ 12. A tribal or bureau of Indian Affairs affidavit of birth.

By my signature below, I hereby certify, under penalty of perjury that the copy of the document I am providing is a true and accurate copy of the original document and that I am legally authorized to be present in the United States.

FULL SIGNATURE OF LICENSE

DATE